PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifical	correspondence includit ed below or directed of	for trange the nerwise	smitting the ISSU Patent, advance of in Block I, by (a	JE FEE and PUBLIC rders and notification a) specifying a new c	CATI of r orres	ION FEE (if requi naintenance fees we spondence address;	ired). B vill be r and/or	locks I through 5 sh nailed to the current (b) indicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						's) Transmittal. Thi	is certifi	icate cannot be used fo	r domestic mailings of the or any other accompanying nt or formal drawing, must	
35204	7590 06/20	/2007			HELV					
SCHLUMBERGER RESERVOIR COMPLETIONS						reby certify that th	is Fee(s	of Mailing or Transs) Transmittal is being	denosited with the United	
14910 AIRLINE ROAD ROSHARON, TX 77583						es Postal Service we ressed to the Mail smitted to the USP	vith suff Stop TO (57)	ficient postage for firs ISSUE FEE address 1) 273-2885, on the da	t class mail in an envelope above, or being facsimile ate indicated below.	
					Ę	ligginia	يک.	2/1/5	(Depositor's name)	
					\vdash	Maine	4)	solis	(Signature)	
						au	egu	st 30,20	07 (Date)	
APPLICATION NO.	IO. FILING DATE		FIRST NAMED INVE		TOR	FOR ATTO		RNEY DOCKET NO.	CONFIRMATION NO.	
10/709,800 05/28/2004				Randolph J. Sheffield			68.0477			
TITLE OF INVENTION	REMOTELY ACTUA	TING A	A CASING CONV	EYED TOOL						
APPLN, TYPE	SMALL ENTITY			PUBLICATION FEE DU		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	NO \$1400		\$300		\$0		\$1700	09/20/2007	
EXAMINER			ART UNIT	CLASS-SUBCLASS						
BOMAR, THOMAS S 3672				166-297000	0					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363), Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
	ND RESIDENCE DATA	A TO B	E PRINTED ON T	·		•		<u>v</u>		
							ee is ide	entified below, the do	ocument has been filed for	
(A) NAME OF ASSI				(B) RESIDENCE: (C		and STATE OR C	OUNT	RY)		
Schlumber ger Technology Corporation Sugarland, Tx 17418 Please check the appropriate assignee category or categories (will not be printed on the patent): Individual A Corporation or other private group entity Government										
riease check the appropr	iate assignee category or	catego	nes (will not be pr	inted on the patent):		Individual A Co	rporatio	on or other private grou	up entity Government	
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)										
Issue Fee										
					The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0 457 (enclose an extra copy of this form).					
5. Change in Entity Sta	tus (from status indicate	l abovo	:)				· <u>JV - U</u>	(chiclose un	oxide copy of this formy.	
	s SMALL ENTITY state			☐ b. Applicant is no	long	ger claiming SMAL	L ENT	ITY status. See 37 CF.	R 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the i	d Publication Fee (if requeeords of the United Sta	aired) v tes Pat	vill not be accepted ant and Trademark	from anyone other the Office.	ıan tl	ne applicant; a regis	stered at	torney or agent; or the	e assignee or other party in	
Authorized Signature	KISMA	15	7/			Date		ust 20,		
Typed or printed name	·Kevin Br	4Y 7	on McG	off		Registration N	o. <u>"5</u>	3,297		
This collection of inform an application. Confident submitting the completed this form and/or suggesti	ation is required by 37 Ciality is governed by 35 I application form to the ons for reducing this but is a second or 12212 1460 Per 1421 1420	FR 1.3 U.S.C. USPT den, sh	11. The information 122 and 37 CFR O. Time will vary tould be sent to the	n is required to obtain 1.14. This collection i depending upon the i Chief Information O	or restindivi	etain a benefit by the imated to take 12 m idual case. Any corr, U.S. Patent and	ne public ninutes mments Fradema	e which is to file (and to complete, including on the amount of tim ark Office, U.S. Depar	by the USPTO to process) gathering, preparing, and te you require to complete truent of Commerce, P.O.	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.